



HAWAII STATE ETHICS COMMISSION
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STATE OF HAWAII
ETHICS COMMISSION

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LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST				
NAME(Last)		(First)	(Middle)	TELEPHONE
Kaopua, John S.				671-4344
MAILING ADDRESS (Street)				FAX
94-497 Ukee Street				676-1144
(City)		(State)		(Zip Code)
Waipahu, HI		96797		
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)				TELEPHONE
Hawaii Ironworkers Stabilization Fund				671-4344
MAILING ADDRESS (Street)				FAX
94-497 Ukee Street				676-1144
(City)		(State)		(Zip Code)
Waipahu, HI		96797		


PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE	
Hawaii Ironworkers Stabilization Fund			671-4344	
MAILING ADDRESS (Street)			FAX	
94-497 Ukee Street			676-1144	
(City)		(State)		(Zip Code)
Waipahu, HI		96797		
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE	
Franklin Hayashida or Brandon Eugenio			671-4344	
MAILING ADDRESS (Street)			FAX	
94-497 Ukee Street			676-1144	
(City)		(State)		(Zip Code)
Waipahu, HI		96797		

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

3/30/05

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
T. George Paris, Managing Director	

NAME OF ORGANIZATION (if applicable)

Hawaii Ironworkers Stabilization Fund

TELEPHONE

671-4344

MAILING ADDRESS (Street)

94-497 Ukee Street

FAX

676-1144

(City)

(State)

(Zip Code)

Waipahu, HI 96797

I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

3/30/05

(Date)